FE	502-02254	
	Docket No.:	

APPLICATION FOR UNITED STATES PATENT **DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that
I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DETACHABLE	UNIT, I	MAGE FORMING	G APPARATUS,	SERVER	COMPUTER.
COMPUTER PR	_ 	ND CLIENT SY	YSTEM		
described and claimed	l in the specifica	ation:			
Check one					
	attached hereto				
			as Application Serial	No	and
	nded on oplicable)	·			
I hereby st	ate that I have		tand the contents of the	he above-iden	tified application, including the
claims, as amended by	y any amendme	nt referred to above.	ice all information kn	own to me to	be material to patentability as
defined in Title 37, Co	ode of Federal F	Regulations, § 1.56.	ice all illioillation ki	lown to me to	be material to patentability as
Under Title provisional application	e 35 U.S. Code n(s) filed within	§ 119, the priority be one year prior to this	penefits of the following application are hereb	ng foreign app y claimed:	olication(s) and/or United States
Japanese Pa	tent Applicati	on No. 2003-1512	54, filed on May 28	3, 2003	
The follow the United States of above-named foreign	America either	(a) more than one	vear prior to this app	lication, or (b	vere filed in countries foreign to b) before the filing date of the
the Customer Number Office connected there	r provided belo	w to prosecute this age that all corresponder	pplication and to trans	sact all busine	wis & Bockius LLP included in ss in the Patent and Trademark umber.
			rstand the contents of	this Declaration	on, and that all statements made
herein of my own kn further that these state	owledge are tra ements were ma ent, or both, t	ue and that all statem ade with the knowled; inder Section 1001 o	nents made on inform ge that willful false st of Title 18 of the Un	ation and beli atements and t ited States Co	ief are believed to be true; and the like so made are punishable ode and that such willful false
Typewritten Full Nam	ı a				
of Sole or First invent		Hideki			SATO
		Given Name	Middle Initial		Family Name
**Inventor's Signature	e:	<u> Mideki</u>	Sato		
**Date of Signature:			20	>	2003
		Month	Day	,	Year
Residence:	Iwatsuki-sh	1	Saitama		Japan
Citizanshin	City	Japan	State of Province		Country
Citizenship: Post Office Address:			., Ltd., 7-1, Funai	3-chome	
(Insert complete mailing		Iwatsuki-shi, Saita	 	J-Chome,	
address, including country)		Iwatouni-oili, Dalla	ina, Japan		
•	-	-	•		nd thereof if Box a. is checked.
**Note to Inventor:	Please sign nan	ne exactly as it appear	s above and insert the	actual date of	signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "×" HERE ☒

PAGE 2 OF U.S.A. DECLARATION FORM

**Inventor's Signature:	r:	Masaharu			INABA	
**Inventor's Cignoture		Given Name	Middle	Initial	Family Name	
Thivellion a Signature.	*	Masahahu			Inaba	
**Date of Signature:				21	2003	
· ·		Month	1	Day	Year	
Residence:	Iwatsuki-sh	i	Saitama		Japan	
	City	_	State of Provin	nce	Country	
Citizenship:		Japan				
Post Office Address:		c/o Fuji Xerox Co., Ltd., 7-1, Funai 3-chome,				
(Insert Complete mailing address, including country)		Iwatsuki-shi, Saitama, Japan				
Typewritten Full Name of Third Joint inventor:		Hitoshi			NANBA	
	_	Given Name	Middle	Initial	Family Name	
**Inventor's Signature:	•	Hitoshi			nanha	
**Date of Signature:				21	2003	
		Month		Day	Year	
Residence:	Iwatsuki-sh	<u>i</u>	Saitama		Japan	
	City	T	State of Provin	nce	Country	
Citizenship:		Japan				
Post Office Address: (Insert Complete mailing		c/o Fuji Xerox C		funai 3-chome,		
address, including country)		Iwatsuki-shi, Sait	Iwatsuki-shi, Saitama, Japan			
					•	
Typewritten Full Name of Fourth Joint inventor **Inventor's Signature:	::	Given Name	Middle	Initial	Family Name	
of Fourth Joint inventor **Inventor's Signature:	::	Given Name	Middle	I nitial	Family Name	
of Fourth Joint inventor	::	Given Name Month			Family Name Year	
of Fourth Joint inventor **Inventor's Signature:	::			Initial Day	•	
of Fourth Joint inventor **Inventor's Signature: **Date of Signature: Residence:	::			Day	•	
of Fourth Joint inventor **Inventor's Signature: **Date of Signature: Residence:	:		1	Day	Year	
of Fourth Joint inventor **Inventor's Signature: **Date of Signature: Residence: Citizenship: Post Office Address:	:	Month	1	Day	Year	
of Fourth Joint inventor **Inventor's Signature: **Date of Signature: Residence: Citizenship:	:	Month	1	Day	Year	
of Fourth Joint inventor **Inventor's Signature: **Date of Signature: Residence: Citizenship: Post Office Address: (Insert Complete mailing	City	Month Japan	State of Provir	Day	Year Country	
of Fourth Joint inventor **Inventor's Signature: **Date of Signature: Residence: Citizenship: Post Office Address: (Insert Complete mailing address, including country) Typewritten Full Name	City	Month	1	Day	Year	
of Fourth Joint inventor **Inventor's Signature: **Date of Signature: Residence: Citizenship: Post Office Address: (Insert Complete mailing address, including country) Typewritten Full Name of Fifth Joint inventor:	City	Month Japan	State of Provir	Day	Year Country	
of Fourth Joint inventor **Inventor's Signature: **Date of Signature: Residence: Citizenship: Post Office Address: (Insert Complete mailing address, including country) Typewritten Full Name of Fifth Joint inventor: **Inventor's Signature:	City	Month Japan	State of Provin	Day	Year Country	
of Fourth Joint inventor **Inventor's Signature: **Date of Signature: Residence: Citizenship: Post Office Address: (Insert Complete mailing address, including country) Typewritten Full Name of Fifth Joint inventor: **Inventor's Signature: **Date of Signature: Residence:	City	Japan Given Name	State of Provin	Day Initial Day	Year Country Family Name	
of Fourth Joint inventor **Inventor's Signature: **Date of Signature: Residence: Citizenship: Post Office Address: (Insert Complete mailing address, including country) Typewritten Full Name of Fifth Joint inventor: **Inventor's Signature: **Date of Signature: Residence:	City	Japan Given Name	State of Provin	Day Initial Day	Year Country Family Name	
of Fourth Joint inventor **Inventor's Signature: **Date of Signature: Residence: Citizenship: Post Office Address: (Insert Complete mailing address, including country) Typewritten Full Name of Fifth Joint inventor: **Inventor's Signature: **Date of Signature: Residence:	City	Japan Given Name	State of Provin	Day Initial Day	Year Country Family Name	
of Fourth Joint inventor **Inventor's Signature: **Date of Signature: Residence: Citizenship: Post Office Address: (Insert Complete mailing address, including country) Typewritten Full Name of Fifth Joint inventor: **Inventor's Signature: **Date of Signature: Residence:	City	Japan Given Name	State of Provin	Day Initial Day	Year Country Family Name	

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.

^{**}Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.